SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

3235-OMB Number: 0104

Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person [*] Bruhlmann Christian	2. Date of E Requiring St (Month/Day/ 12/15/202	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol <u>Onconetix, Inc.</u> [ONCO]				
(Last)(First)(Middle)C/O ONCONETIX, INC.201 E. FIFTH STREET, SUITE 1900(Street)CINCINNATI OH45202(City)(State)(Zip)			4. Relationship of Reporting Issuer (Check all applicable) Director X Officer (give title below) Chief Strategy	10% C Other below)	wner (specify	A Person	/Year) bint/Group Filing e Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
			·,	(I) (Inst	r. 5)		
Common Stock			236,029	(I) (Inst	·		
		erivative		Ily Owr) led		
		erivative s, warrar isable and ite	236,029 Securities Beneficial hts, options, convertil	Ily Owr ble sec) led	5. sion Ownership cise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)

Explanation of Responses:

/s/ Christian Bruhlmann

12/28/2023 Date

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

OMB APPROVAL